PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for							
maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
KNOBBE MAR 2040 MAIN STRE FOURTEENTH FI	LOOR	AR LLP	AUG 2 8 ZOOR	I hereby certify that the States Postal Service	rtificate of Mailing or Trai his Fee(s) Transmittal is bei with sufficient postage for fi il Stop ISSUE FEE addres PTO (571) 273-2885, on the	nsmission ng deposited with the United irst class mail in an envelope s above, or being facsimile date indicated below.	
/53/5908 <mark>\225</mark> HE5 <mark>\ 996</mark> 9	065 10692133			J	me s Will	(Depositor's name)	
FC:2501 FC:1504	700.00 OP 300.00 OP				9m /m 8/24/0	(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAMED IN		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/692,133	10/23/2003	Dennis L. Par			UNIUTAH.003NPC1	2162	
TITLE OF INVENTION: METHOD AND APPARATUS FOR ENHANCING AN IMAGE USING DATA OPTIMIZATION AND SEGMENTATION							
APPLN, TYPE	SMALL ENTITY	ISSUE FI	EE PU	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300	\$1000	09/19/2006	
EXAMINER		ART UNIT		ASS-SUBCLASS]		
KASSA, YOSEF		2624		382-154000	_	•	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			4				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
University Foundatio	Salt Lake City, Utah						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🙎 Corporation or other private group critity 🗀 Government							
4a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 1 - 1 4 1 0 (enclose an extra copy of this form).				
5. Change in Entity Status a. Applicant claims Sl	(from status indicated above	•			LL ENTITY status. See 37 (
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature	fu h			Date	8/24/06		
Typed or printed name	James W. Hil	1, M.D.		Registration 1	√o. 46,396		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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August 24, 2006

Docket No.: UNIUTAH.003NPC1

Page 1 of 1

AUG 2 8 2006

Please Direct All Correspondence to Customer Number 20995

ISSUE FEE TRANSMITTAL LETTER

pplicant

Dennis Parker et al.

App. No

10/692,133

Filed

: October 23, 2003

For

METHOD AND APPARATUS FOR

ENHANCING AN IMAGE USING

DATA OPTIMIZATION AND

SEGMENTATION

Art Unit

2624

Class/Sub-Class

382-154000

Examiner

Yosef Kassa

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1000 is enclosed for the following fees:
 - (X) \$700 Issue Fee
 - (X) \$300 Publication Fee
- (X) Return prepaid postcard.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.

James W. Holl, M.D. Registration No. 46,396 Attorney of Record Customer No. 20,995

(949) 760-0404

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

August 24, 2006

(Date)

James W. Hill, M.D., Reg. No. 46,396